

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 417 / 425

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Political Action Committee of the American Association of Orthopaedic Surgeons

**A.**

Full Name (Last, First, Middle Initial)

Citizens For Cochran

Mailing Address PO Box 7183

City  
Tupelo

State  
MS

Zip Code  
38802

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Sen. Thad Cochran

Office Sought:

☐ House

☒ Senate

☐ President

Disbursement For:

2010

☒ Primary

☐ General

☐ Other (specify) ▼

State: MS

District:

Transaction ID: 30939145

Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Steve Rothman For New Jersey Inc.

Mailing Address P.O. Box 714

City  
Hackensack

State  
NJ

Zip Code  
07602

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Steven R. Rothman

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2010

☒ Primary

☐ General

☐ Other (specify) ▼

State: NJ

District: 09

Transaction ID: 30939148

Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Sue Myrick For Congress

Mailing Address P.O. Box 37091

City  
Charlotte

State  
NC

Zip Code  
28237

Purpose of Disbursement

011

Category/  
Type

Candidate Name

Rep. Sue Wilkins Myrick

Office Sought:

☒ House

☐ Senate

☐ President

Disbursement For:

2010

☒ Primary

☐ General

☐ Other (specify) ▼

State: NC

District: 09

Transaction ID: 30939150

Date of Disbursement

12 / 04 / 2009

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....